

# STATE OF NEW HAMPSHIRE PASSENGER TRAMWAY BOARD

## APPLICATION FOR NEW CONSTRUCTION, MODIFICATION OR RELOCATION AND REGISTRATION OF CONVEYOR OR CAROUSEL

DATE RECEIVED:

DATE APPROVED:

In accordance with the provisions of RSA 225A, as amended, application is made for construction and registration of the following tramway (Where space is insufficient for answer, please attach information on additional sheet and reference the question number.):

**Part 1**                      **APPLICATION FOR CONSTRUCTION:**      **Date:** \_\_\_\_\_

Tramway Number \_\_\_\_\_

New Construction \_\_\_\_\_

Relocation/Modification \_\_\_\_\_

Description: \_\_\_\_\_

### **AREA DATA**

Owner: \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

If corporation or partnership, give names and address of officers or partners.

Manager \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_

Location of Conveyor or Carousel \_\_\_\_\_

Name of Conveyence (if known) \_\_\_\_\_

### **LIFT DATA**

**Tramway Type:**                      Conveyor \_\_\_\_\_                      Carousel \_\_\_\_\_

Manufacturer: \_\_\_\_\_

Lift Model: \_\_\_\_\_

Lift Drive horsepower: \_\_\_\_\_

PLEASE INCLUDE LOCATION PLAN SHOWING THE PROPOSED LOCATION AND ENVIRONS.

**For Pre-Approved lifts, include a certification by the manufacturer that this lift conforms to the pre-approved submission.**

**For lifts not previously approved, the following must be submitted:**

- a. A set of drawings, stamped by a design engineer showing the basic structure, electrical and mechanical systems.
- b. A design parameter specification with the engineer's stamp, showing the allowable operating and installation procedures, such as passenger spacing, type of passengers, use of recreational devices, location of safety devices, anchorages, etc.
- c. Operating and maintenance instructions for the lift system.

**Personnel:**

What is the minimum number of operator/attendants to be utilized?\_\_\_\_\_

Where are these personnel stationed?\_\_\_\_\_

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If operating with a single operator, does the operator have the entire lift in his view?\_\_\_\_\_

Describe any area where the conveyor is not visible to any attendant\_\_\_\_\_

**Will the lift be used at night?**\_\_\_\_\_

If yes, describe lighting for lift attendants and usage\_\_\_\_\_

**Describe any variance request to the Rules, Regulations and Code of the New Hampshire Tramway on an attachment together with justification.**

Are any variances requested? \_\_\_\_\_

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I certify that, to the best of my knowledge and belief, the answers to the above questions are correct, that safety precautions are being taken, and qualified personnel are to be employed.

OWNER\_\_\_\_\_BY\_\_\_\_\_DATE\_\_\_\_\_

DESIGNER\_\_\_\_\_BY\_\_\_\_\_DATE\_\_\_\_\_

**NOTICE: THE BOARD MAY REQUEST ADDITIONAL INFORMATION FOR VERIFICATION OF COMPLIANCE WITH ITS REGULATIONS.**

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**OFFICE USE ONLY**

At a meeting of the Board on \_\_\_\_\_, the above application was considered for construction and the following action was taken.

\_\_\_\_\_  
Clerk

